CITY OF EUREKA

PUBLIC WORKS DEPARTMENT

531 K Street Eureka, California 95501-1146

APPLICATION FOR WASTEWATER DISCHARGE PERMIT

Information on the completed application will be verified.

	SECTION A - GENERAL INFORMATION
1.	Facility Name: Aba LOST COAST BAZWENT CAFE
	Street:
***************************************	City: State: Zip: CA 95501
-	Phone #: (707) 445.4481 Fax #: (707) 445.4483
2.	Business Mailing Address:
	Street or PO Box: (p) T fount TH ST
	City: State: Zip: 95501
3.	Designated signatory authority of the facility:
and the second second second	Name: BARBARA GLOUM PRESIDEAT
IIIII — L comodd	Address: City: State: Zip:
	<u>ξωβένΑ</u> <u>ΓΑ</u> <u> 9550\</u> Phone #:
	(707) 445-4487 (707) 445-4483
4.	Designated facility contact:
	Name: Title: PROJECT MAJAGE
	Phone #: Fax #:
raketerentiin	Emergency Phone #:

UTILITIES OPERATIONS DIVISION

Wastewater Treatment Water Treatment FAX - Wastewater Treatment

(707) 441-4234 (707) 441-4366

Pretreatment Water Quality Laboratory (707) 441-4362 (707) 441-4363

(707) 441-4364

FAX - Water Treatment

(707) 441-4265

	SECTION B - BUSINESS AC	TIVITY	
activities listed b	ploys or will be employing processes in any elow (regardless of whether they generate v check beside the category of business activ	wastewater, waste sludge, or	or business hazardous
Industrial Categories	Not Applicable		
Electroplating Feedlots Fertilizer Manufact Glass Manufacturir Inorganic Chemica Iron and Steel Leather Tanning at Metal Finishing Nonferrous Metals Nonferrous Metals Organic Chemicals Paint and Ink Form Paving and Roofing Pesticides Manufact Petroleum Refining Pharmaceutical Plastics Processing Porcelain Enamel	cturing ring conic Components Manufacturing defining Molding and Casting) ng lis and Finishing Forming Manufacturing S Manufacturing g Manufacturing g Manufacturing g Manufacturing g tic Materials Manufacturing g Manufacturing g Manufacturing g Manufacturing g g Manufacturing g g tic Materials Manufacturing g Manufacturing		

	SECTION B - BU	SINESS ACTIVITY (cont.)	
2. Describe all operations at	this facility includi	ng primary products	or services:	
Brewing beer and pack	caging	* ************************************		
		-		
		144		
	V-1			
Indicate applicable Standa System (NAICS) number for all importance.)	ard Industrial Classi processes. (If mor	ification (SIC) or No e than one applies,	rth American Industr list in descending or	y Classificalton der of
a. SIC 2082 - Malt Be	everages	\$500°F Secilitareanneanneannean ac a	7200	000-00-00-00-00-00-00-00-00-00-00-00-00
^{b.} NAICS 312120 - B	rewery	***************************************	уруун адировдагар идоолимин жоонд доогоогоогоогоогоогоогоогоогоогоогоогоог	990000000000000000000000000000000000000
C.	A. V. Ji.		000000000000000000000000000000000000000	
d.				· ·
e.				30000010
			1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994 - 1994	nnoondaanilaalikkasii 1916 kankkasiinnoonoonoonoonoonoono * ee * *
4. Production Volume:		79-795-525555555555555555555555555555555		
The transpoor word in Africa Science and the Control of the Contro		lendar Year	Estimate This	
Product (Brand Name)	Amounts Per Average	Day (Daily Units) Maximum	Amounts Per D Average	Maximum
Beer	0 bbls	0 bbls	* 60,000 bbls/year	300,000 bbls/year
-			1.89 million	9.45 million
			gallors	gallons
			13	0 '
	n-April			~~~;~~;~;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
		·		
	200000000000000000000000000000000000000			
	-			
			1	

^{*} Estimated for 1st year of production. Maximum capacity of brewery is 300,00 bbls/year $31.5~\rm gallers~p^{4}~bbls$ Page 3 of 19

	Si	ECTION C - WATER SUPPLY	
1.	Water Sources: (Check all that apply	··	
	Private Well	y • <i>y</i>	
	☐ Surface Water		
	Municipal Water Utility (Specify Ci	tv ar Agency):	
	Other (Specify):	,	
2,	Water Bill Information:		
	Name: Table Bluff Brewery	Water Service Account Number:	
	Street: 1600 Sunset Drive		
	City: Eureka State	CA Zip Code: 95501	
3.	List average water usage on premise	es:	
	Туре	Average Water Usage (GPD)	Indicated Estimated (E) or Measured (M)
a.	Domestic	1,980 - 3,960	E
b.	Industrial/Commercial Process	31,850 - 63,700	E
C.	Boiler feed	1,760 - 3,520	E
d.	Irrigation and lawn watering	0	
e.	Plant and equipment washdown	see b above	
f.	Contact cooling water	None	
g.	Non-contact cooling water	None	
h.	Air pollution control	None	
i.	Contained in product	9,100	E
j.	Other:		
k.	TOTAL	45.100 - 80.300	E

	SECTION D - SEWER INFORMATION	
yes If Yes, Please indicate Sanit	ed to the public sanitary sewer system? ary Sewer Account Number:	
If No, have you applied for a	sanitary sewer hookup? 🔲 yes	□ no
2. For a new business:		
	deling or modifying the building?	yes 🗌 no
have you applied for a buildi	new building or modifying an existing on ng permit? 🔲 Yes 🔲 No	е,
system. (If more than five, atta	and flow of each facility sewer which ch additional information on another	connects to the sanitary sewer sheet.)
Sewer Size	Descriptive Location of Sewer Connection or Discharge Point	Average Flow (GPD)
8" Process Sewer	Sunset Dr. ~500' west of Weiler Rd	50,000 - 70,000
4' Domestic Sewer	Sunset Dr. ~ 450' west of Weiler Rd	2.000 - 4.000
		·
		Toutheadon source v
SECTION	E - WASTEWATER DISCHARGE INFO	NEM ATION
32011010	E - WASTEWATER DISCHARGE INFO	HWATION
1. Provide the following informati	on on wastewater flow rate. [New fac	
Day of the Week:	Hours of Discharge	Hours discharged per day
Monday	(e.g. 9 am - 5 pm.) 00:00 - 00:00	(e.g. 8 hours/day) 24 hrs/day
Tuesday	1	Z-+ margay
Wednesday	Notification of the state of th	**************************************
Thursday		
Friday		485-70-14-1
Saturday		
Sunday	L	V
2. If batch discharge occurs or wi	Il occur, indicate: [New facilities ma	v estimatei
a. Number of batch discharges	Not Applicable per	day
b. Average discharge per batch		
c. Time of batch discharges	on	6-30000
il rés.	(Hours of Discharge)	(Days of the Week)
d. Flow rate e. Percent of total discharge		gallons/minute
e. Leiceur di roral dischigi de		

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SECTION E - WASTEWATER DISCHARGE INFORMATION (cont.)

3. Schematic Flow Diagram - For each major activity in which wastewater is or will be generated, draw a diagram of the <u>flow of materials</u>, <u>products</u>, <u>water</u>, <u>and wastewater</u> from the start of the activity to its completion. Include the average daily volume and maximum daily volume of each wastestream [new facilities may estimate]. If estimates are used for flow data, this <u>must</u> be indicated. <u>Number each unit process</u> having wastewater discharges to the community sewer. Use Section H.

See attached Figure 1.0 - Schematic Flow Diagram

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SECTION E - WASTEWATER DISCHARGE INFORMATION (cont.)

Facilities that checked activities in question 1 of Section B are considered Categorical Industrial Users and should skip to question 6.

4. For Non-Categorical Users Only: List average wastewater discharge, maximum discharge, and type of discharge (batch, continuous, or both), for each plant process. Include the reference number from the process schematic that corresponds to each process. [New facilities should provide estimates for each discharge].

No.	Process Description	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (Batch, Cont., None)
1.	Process wastewater	32,000	63,700	Cont.
2	Domestic sanitary	2,000	4,000	Cont.
	*Estimated for 1st year of p	roduction		

ANSWER QUESTIONS 6 & 7 ONLY IF YOU ARE SUBJECT TO CATEGORICAL PRETREATMENT STANDARDS Not Applicable

For Categorical Users: Provide the wastewater discharge flows for each of your processes or proposed processes. Include the reference number from the process schematic that corresponds to each process. [New facilities should provide estimates for each discharge].

No.	Process Description	Average Flow	Maximum Flow	Type of Discharge
	NPGGPAGGP-authorizance-page-page-page-page-page-page-page-pag	(GPD)	(GPD)	(Batch, Cont., None
No.	Process Description	Average Flow	Maximum Flow	Type of Discharge
		(GPD)	(GPD)	(Batch, Cont., None
No.	Process Description	Average Flow (GPD)	Maximum Flow (GPD)	Type of Discharge (Batch, Cont., None

SECTION E - WASTEWATER DISCHARGE INFORMATION (cont.)
Not Applicable 6. For Categorical Users Subject to Total Toxic Organic (TTO) Requirements: Provide the following (TTO) information.
a. Does (or will this facility use any of the toxic organics that are listed under the TTO standard of the applicable categorical pretreatment standards published by EPA?
☐ Yes ☐ No
b. Has a baseline monitoring report (BMR) been submitted which contains TTO information? Yes
C. Has a toxic organics management plan (TOMP) been developed?
☐ Yes, (Please attach a copy) ☐ No
7. Do you have, or plan to have, automatic sampling equipment or continuous wastewater flow metering equipment at this facility?
Current: Flow Metering
Planned: Flow Metering ☑ Yes ☐ No ☐ N/A Sampling Equipment: No
If so, please indicate the present or future location of this equipment on the sewer schematic and describe the equipment below:
Plan to install mag meter on discharge pipe from pH Balance Tank
8. Are any process changes or expansions planned during the next three years that could alter wastewater volumes or characteristics? Consider production processes as well as air or water poliution treatment processes that may affect the discharge. Yes No, (skip question 10)
Briefly describe these changes and their effects on the wastewater volume and characteristics: (Attach additional sheets if needed.)
Initial production is estimated at 60,000 - 70,000 bbls/yr (wastewater flow 23,000 - 27,000 gpd) Future production is estimated at 300,000 bbls/yr (wastewater flow ~115,000 gpd)
10. Are any materials or water reclamation systems in use or planned? ☑ Yes ☐ No, (skip question 12)

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SECTION E - WASTEWATER DISCHARGE INFORMATION (cont.)
Briefly describe recovery process, substance recovered, percent recovered, and the concentration in the spent solution. Submit a flow diagram for each process: (Attach additional sheets if needed.)
Boiler condensate recovery system
SECTION F - CHARACTERISTICS OF DISCHARGE
DO NOT LEAVE BLANKS.
Write "Yes", "No", or "Uncertain" (or "Y", "N", and "U") in the columns for each chemical. "Stored" means stored on site. "Used" means either used on a regular basis or used in a large volume on an infrequent basis. "Discharged" means discharged to the Control Authority's wastewater treatment plant. "Other Disposal Method" means discharged to other than the Control Authority's wastewater treatment plant.

Be aware that commercially available products used at a business may contain chemicals on these lists. Consult the Material Safety Data Sheets (MSDS) for each product to determine the presence or absence of a listed chemical.

New dischargers must attach copies of the two most recent analytical reports for wastewater testing, if results are available. New dischargers should use the tables to indicate which pollutants will be present or are suspected to be present in proposed wastestreams. If chemicals are suspected to be present, an "S" may be written next the "Y",

"N", or "U" in each column.

Attach copies of the MSDS for each commercial product discharged to the Control Authority's wastewater treatment plant, regardless of chemical constituents in the product.

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Other Disposal Method No

	-			`				- Abrillander		
	Siored Siored	Desco C	Uscharged		Officer	***************************************	Constituent	Stored	Pag C	Discharged
				-	Method			j.		
1,1,1-inchloroethane	2	2	2		9			No	No	o N
1,1,2,2-Tetrachloroethane	_				_		4-Chlorophenyl phenyl ether	_	_	-
1,1,2-Trichloroethane							4-Nitrophenoi			
1,12-Benzoperylene				-		1	4-Nitrophenol	_		
(see penzo (gni) perviena)	1	_		\dagger	4		Acenaphthene			
1,1-Dichiproemane	+	1		1	_		Acenaphthylene			
1,1-Ucniotoetnyiene	1	1		1	_		Acetone		,	
1,2,4-1 fichtoroenzene	1	1		-		1	Acidity			
1,2,5,6-Uibenzanihracene					na n	t	Acrolein			
+ O Bonzanthracens	-	$\frac{1}{1}$	1	1	-		Acrylonitrie			
(coa Bann (a) anthracena)	••••••	***********			Maria	L	Alcohol			
12-Dichlorobanzana	-	-					Aldehyde			
1 2-Dichlornathana			$\frac{1}{1}$	+			Aldrin	_	-	
1.2-Dichlororonana		-		l			Algicide (Algaecide)			_
13-Dichloropropana		_	+	+	•		Alkalinity	_		
(see 1.3-Dichloropropylene)	-	0000005	Penni		0000000		Alpha-BHC		_	
12-Dichloropropylene		-	1	+			Alpha-endosuttan		-	
12-Dipheavlhydrazine	-		-	+	-		Aluminum			
1 2-trans_Dichlomorthydana		1	1	+			Ammonia			
1 2-trace. Dichlorothylona		-	-	\dagger			Ammonia-Nitrogen			_
1.2 Dicheshorages		-		+			Anthracene			
1,0-Childipoliticalis	1	-		+			Antimony			
1,5-Dicitionappyiene			-	+		L.,	Arochlor 1016 (see PCB-1016)			
1,4-Uichtgrobenzene	_		-	1		L	Arochlor 1221 (see PCB-1221)		F	
11,12-benzolluoraninene	1	00000		•	0000000	L	Arochlor 1232 (see PCB-1232)		ļ	
(see Derizo (k) nouranniana)			+	+		Ľ,	Arochlor 1242 (see PCB-1242)		ļ	-
S.S. 1, p. 1 Strain includenza-p-maxin (1000)	-		-	1	-	<u>. </u>	Arochlor 1248 (see PCB-1248)	L		-
Z.Jarnenylenepyrene	******	1000005	-		0000000		Arochlor 1254 (see PCB-1254)		ļ	
See masm (1,2,0-bu) bytene)	-		-			L	Arochlor 1260 (see PC8-1260)	L	T	_
2,4,5-i richiorophenol					00000	1	Arsenic	ļ	-	
2,4-Uichlorophenol					-	L	Achaethe	I	+	
2,4-Dichloropropene				-		1	Ractaria			
2,4-Dimethylphenol			-	-		1_	Ramin		+	-
2,4-Dinitrophenol		3000	-	-			Ronzoo		+	1
2,4-Dinitrofoluene	i.						Develoloce	1	1	
2,6-Dinitrotoluene	-				00000		are market	1	1	+
2-Chloroethylvinyl ether				-			Denze (e) animacene	_	1	-
2-Chloromethane			-		000000		Dental (ch) pytente	_	+	
(sea Methylene Chloride)			2		009000		Deliko (gni) peryrene		7	
2-Ohloronaphthalene						TE.	Denzo (K) nuoraminane		1	
2-Chlorophenol				_			Delymun		+	
2-Nitrophenol		.000				<u> </u>			1	
3,3'-Dichlorobenzidiene				-			beta-endostillan	-	-	_
3,4-Benzolluoranthene		ngdiki			-		bis (z-einynexyi) prinalate	Ţ	1	
3,4-Benzopyrene			1000000	-			bis (2-Criterethoxy) methane		1	+
(see denzo (a) pyrene)		7	_			1	de (a.C. Ademiconemia other	ļ	1	1
4,4 -000				1			Ris (2-athylhovyl) ohthelete	ļ	1	1
4,4 - UDE		\{\bar{\}}	<u> </u>	-			Bis (chloromethyl) ether	Ţ.	 -	\Rightarrow
4 6-Dinitro-o-presol	1	¥	ð	+	J		BOD (5 day)	Ş	\$	Yes (S)
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CITY OF EUREKA
WASTEWATER DISCHARGE PERMIT

No N	Method No
Formaldehyde Gamma-BHG Grease & Oil, Petroleum Grigin, Non-poter (see Total Petroleum Hydrocarborns Infa- Fed) Heddachlor ecoxide Heddachlor ecoxide Herachlorocycloperane Hydrogen (see TKN) Lead Hydrogen (see TKN) Lead Lindane (see Gamma-BHC) In & polyme Indane (see Gamma-BHC) In & polyme Marginesium Marginesium Marginesium Marginesium Marginesium Multiple Neid (see Hydrochloric Acid) Nathrale-Nilrogen Nathrale-Nilrogen Nilrocentee Nilrogen Nilrocentee Nathrocycliperol	
rigin, Non-polar rigin,	Gamma-B Grease & Grea
n Hydroxide) The Hydroxide oric Acid oric Aci	Grease & Gre
oric Acid)	(see Total Red) Hardness Hardness Heptachlor Heptachlor Hexachlor Hodrated I hydrogen Indeno (1,) Indeno (1,
n Hydroxide) Ness Yes No The state of the	Harchess Heptachlor Heptachlor Herachlor Hexachlor Hexac
n Hydroxide) Ness Yes No Smethane) Oric Acid) Oric Acid Acid Acid Acid Acid Acid Acid Ac	Heptachlo Heptachlou Herbicide Herachlou Hexachlour Hexachlour Hexachlour Hexachlour Hexachlour Hexachlour Hydraled I. Hydrogen Indeno (1, 10dine) Iron Isophorom Ketone
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Herachlorobenzene Herachloroburadiene Herachloroburadiene Herachlorocycloperitadiene Hydrofilorocycloperitadiene Hydrofilorocycloperitadiene Hydrofilorocycloperitadiene Hydrofilorocycloperitadiene Hydrofilorocycloperitadiene Hydrofilorocycloperitadiene Hodine Hodine Hodine Hodine Hodine Hydrofilorocycloperitadiene Hyd	
Hexachiorocyclohexane Hydrogan Peroxide Hydroganese MidAS (see Gamma-BHC) Mi	
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Yes Yes Yes	MINIST NOTES
Yes Yes Yes	MICAGI
Yes Yes Yes Yes No No	Nitrate-Nit
cN cN	Nitric Acid
Nitrobenzene Nitrophenol N-Nitrosodimethylamine NANitrosodimethylamine	Nitrite-Nitr
Nitrophenol N-Nitrosodimethylamine N-Mitrocodi M-Donnilamine	Nitrobenze
N-Nitrosodimethylamine	Nitropheno
N. M. M. M. Despuisming	N-Nitrosod
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			WASTE	CITY OF EUREKA WATER DISCHARGE APPLICATION FORM	CITY OF EUREKA. WASTEWATER DISCHARGE PERMIT APPLICATION FORM				
Constituent	Stored	Used	Discharged	Other Disposal Method	Constituent	8	Used Discharged		7
o xylene	No No	S	No	No	Thailium	No.	No No	No	,
Oil & Grease, Polar					Tin				П
Circa Circase, remuseum Circui, Norriposa Circa Total Petroleum Hydrocarbons Infa- Roch	, , ,	, ç >	2	>	TKN				
Organic Nitrogen	(S) (S)	ß z	(e)	ri v	Toluana				T
Orthophosphate Phosphorous	•	-		-	Total Petroleum Hydrocarbons Infa-Red				7
p,p'-DDX (see 4,4'-DDE)					(TPHIR)		<i>a</i>	94294	•
p.p'-TDE (see 4,4'-DDD					Toxaphene				
Farachorometa cresol				I	TPHIR (see Total Petroleum Hydrocarbons)				П
PCB-1921			rin asri	T	Tribunation				T
PCB-1232		l			Tributhilia (TRT)				T
POB-1242					Trichtocethylene				Т
PCB-1248		H			Trichloroethylene				Τ
PCB-1254					Trichloroftueromethane				Π
FCB-1260		1			Trichloromethane (see Chloroform)		>		
Femacriorophenol (PCP)	1	-			TSS (see NFR)		ഹ	(S)	
Destroids		1			Vanadium		2		<u> </u>
Potroloum Solvont	Ŧ	+			Vinyt Chlonde				T
pH (less than 5.5 or equal to or greater than		H		ĺ	Volatile Acids Xviene (fotal)				T
(6)			1000000		Zinc	\	}	>	Τ
Phenathrene	3	No.			Province Annual Control of the Contr				1
Phenol(s)	7	>		>					
Friosphoric Acid		22	res (s)	ON.					
Prinspiriorous	9	9	dN dN	d d					
Pyrene				Ŧ					
Pyrene									
Hadioactive Materials									
(Alpha, Beta, or Gamma)			-	-					
Selenium									
Silver	,			-					
Sodium									
Sodium Hydroxide	Yes	Yes	Yes (s)						
Solvent	2	ž	9						
Sulfate (SO ₄)	_	-							
Sulfide (S)									
Sufficient Asia			1	1					
Surfactors (MRAC)		-							
TCDD	-		1				·		
(see 2,3,7,8-Tetrachlorodibenzo-p-dloxin)	***************************************	************	>	nananja seperanta	÷				
Temperature exceeding 65 degrees Celcius,			(a) 30 X						
Tetrachloroethylene		-	No (3)						
Tetrachioromethane		l							
(see Carbon Tetrachioride)	}	7	}	7					
III	-		>	\					
				C L OCCU	Of 10				

		SECTION G - TREATMENT					
1.	Is any form of wastewater treatment (see list below) practiced at this facility? ☐ Yes ☐ No						
	If No, is any form of wastewater treatment (or changes to a existing wastewater treatment) planned for this facility within the next three years? ☑ Yes ☐ No						
		es, please describe:					
***************************************	<u>Hi</u>	gh Strength Wastes (i.e. trub, spent grains and yeast) will	be haul	ed offs	ite.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		ocess wastewater will screened and pH adjusted e attached Figure 2.0	·				
		e attached Figure 2.0					
2. as	Tre app	atment devices or processes used or proposed for treating waster propriate).	water or s	ludge (d	check as n	nany	
		Air Flotation Centrifuge Chemical precipitation Chlorination Cyclone Filtration Flow equalization Grease &Oil Interceptor, type:					
size		Grease trap,					
		Grinding filter Grit removal Ion exchange Neutralization, pH correction Oil & Water Separator, type: Ozonation Reverse osmosis Sand & Oil Interceptor, type: :					
		Screen Sedimentation Septic tank Solvent separation Spill protection Sump Biological treatment, type:	.				
		Rainwater diversion or storage Other chemical treatment, type:	-				
		Other physical treatment, type:					
		Other, type:					

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SECTION G - TREATMENT (cont.)							
3. Description Describe the treatment fac							
. 4					sonnihaanna saanna s		
Attach a pro- by-products conditions.	Attach a process flow diagram for each existing treatment system. Include process equipment, by-products, by-product disposal method, waste and by-product volumes, and design and operating conditions. See Figure 2.0						
5. Describe any wastewater	changes in treatment discharge to the sanita	or disposal ry sewer. P	methods pl	anned or u le estimate	nder construction	ction for th	ie
Process	wastewater will be	screened	to remove	solids p	ior to being		manusuuru suurunnin puhinnin pipin ja ja
	a pH Balance Tank v						imits.
	6. Do you have a treatment operator? ☐ Yes ☒ No						
(if Yes),	Name: NA						
	Title:						
	Phone:	:	***************************************				
	Days and Hours Operator is on Site:						
7. Do you have a manual on the correct operation of your treatment equipment? X Yes No To be developed 8. Do you have a written maintenance schedule for your treatment equipment?							
8. Do you have	No To be develope	d	n your treat	ment ednib	ment	-	
	SECTION H - FA	CILITY OPE	RATIONAL	CHARACT	ERISTICS		
1. Shift Informa Work Day Estim	tion Mon. Tues. ated work schedule for	₩ed. Ti 1st year) 🖄 hur. Fri.	□ Sat.	□ Sun,		
Days of the Week	Shifts per Work Day		ployee's per			rt and End	Times
And Secretary of the Part of t		1 st	2 rd	3 rd	1 st	2 nd	3 ₁₀
Monday	1 1	20-30			3:00 - 17:0 0		
Tuesday	1 1	20-30			B:00 - 17:00		2
Wednesday Thursday	1	20-30 20-30			B:00 - 17:00		
Friday		20-30		<u> </u>	B:00 - 17:00		-
Saturday		20-30			8:00 - 17:00		
Sunday					1		

SECTION H - FACILITY OPERATIONAL CHARACTERISTICS (cont.)					
2. Indicate whether the business activity is: Continuous through the year, or Seasonal - Check the box in front of the months of the year during which the business activity occurs:					
□Jan □Feb □Mar □Apr □May □Jun □July □Aug □S	ep				
Comments:					
3. Indicate whether the facility discharge is: Continuous through the year, or Seasonal - Check the box in front of the months of the year during which industrial wastewater discharge occurs:					
□Jan □Feb □Mar □Apr □May □Jun □July □Aug □S	ep □Oct □Nov □Dec				
Comments:					
4. Does operation shut down for vacation, maintenance, or other reasons? X Yes No If Yes, indicate reasons and period when shutdown occurs: Maintenance - No shutdowns are scheduled yet					
5. List types and quantity of chemicals and raw materials used or planned for use (attach list if needed). Include copies of Manufacturer's Safety Data Sheets (if available) for all chemicals identified:					
Chemical / Raw Material	Quantity				
Acid #14 (Cleaner)	TBD				
SB - Peracetic Acid (Sanitizer)	TBD				
Hydro Clean 500 (Cleaner)	TBD TBD				
Shear 250 (Alkaline cleaner)	TBD				

SECTION H - FACILITY OPERATIONAL CHARACTERISTICS (cont.)

Building Layout - Draw to scale the location of each building on the premises. Show map orientation and location of all water meters, storm drains, numbered unit processes (from schematic flow diagram), public sewers, and each facility sewer line connected to the public sewers. Number each sewer and show existing and proposed sampling locations. A blueprint or drawing of the facilities showing the above items may be attached in lieu of submitting a drawing on this sheet. See previously submitted permitted plan drawings.

	SECTION I - SPILL PREVENTION
1.	Do you have chemical storage containers, bins, or ponds at your facility? ☑ Yes ☐ No
	If Yes, please give a description of their location, contents, size, type, and frequency and method of cleaning. Also indicate in a diagram or comment on the proximity of these containers to a sewer or storm drain. Indicate if buried metal containers have cathodic protection.
	See plan sheet 2/A-114 at Grid Line P between 13 & 16 for chemical storage location
2.	Do you have floor drains in your manufacturing or chemical storage area(s)? ☑ Yes ☑ No
	If yes; where do they discharge to?
	No floor drains in chemical storage area. Yes - floor drains in manufacturing area that
	drain to pH balancing/pretreatment area as applicable. See P3.xx drawing for locations.
3.	If you have chemical storage containers, bins, or ponds in manufacturing area, could an accidental spill lead to a discharge to: (check all that apply). an on-site disposal system public sanitary sewer system (e.g. through a floor drain) storm drain
	☐ to ground ☐ not applicable, no possible discharge to any of the above routes ☑ other, specify: No chemical storage in manufacturing area. Storage tanks will be
	double walled with 110% containment
4.	Do you have an accidental spill prevention plan (ASPP) to prevent spills of chemicals or slug discharges from entering the sanitary sewer collection system? Yes - [Please enclose a copy with the application] No
	N/A, Not applicable since there are no floor drains or other means for discharges to enter the sanitary sewer collection system
5.	Please describe below any previous spill events and remedial measures taken to prevent their reoccurrence.
	N/A - New facility
	,

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SECTION J - NON-DISCHARGED WASTES							
Are any waste liquids or sludges generated and not disposed of in the sanitary sewer system? Yes, please describe below No, skip the remainder of Section J							
Wast	Waste Generated		Quantity (per year)		Method	Disposal Location (Onsite or Offsite)	
Spent Grai	Spent Grain						
Sent Yeas	Sent Yeast			Animal Feed		Off Site	
Trub							
			A CONTRACTOR OF THE CONTRACTOR				
If an outside firm removes any of the above listed wastes, provide the name(s) and address(es) of all waste haulers:							
Company Name	TBD			. •			
Address				-			
City, State, Zip							
Permit No. (if available)					. ;		
3. Have you been issued any Federal, State, or local environmental permits? Yes No If yes, please list the permit(s):							
	100 to 10	1.50	5000000 prompt, 11			ON ALL THE COLUMN TO THE COLUM	
7802/				<u>. 141 -</u>			

	SECTION K - AUTHORIZED SIGNATURES				
	Compliance certification:				
1.	Are all applicable Federal, State, or local pretreatment standards and requirements. — Yes — No — Not yet discharging	ents being met on a			
2.	<u>If No:</u>				
	a. What additional operations and maintenance procedures are being considered to bring the facility into compliance? Also, list additional treatment technology or practice being considered in order to bring the facility into compliance.				
~ <u>.</u>					

	Provide a schedule for bringing the facility into compliance. Specify major events planned along with reasonable completion dates. Note that if the Control Authority issues a permit to the applicant, it may establish a schedule for compliance different from the one submitted by the				
	Milestone Activity	Completion Date			
-					

•		Contractive of the Contractive o			
Authorized Representative Statement:					
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and bellef, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					
	Jeffrey South Project N	langer			
	Name (Please Print) Title	440-9098			
A CONTRACTOR OF THE PARTY OF TH	Signature Date Phone	440-10 10			

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PermAppL.doc



